FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

PRESS, BRIAN



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secreta y of State DIVISION OF CORPORATIONS

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

19. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

-4 A - deser (D.O. Dev. Mumber in Not Accoptable)

07/01/1998

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90237 011 ***150.00

DOCUMENT # P98000060087

1080 LINTON BLVD	
DELRAY BEACH FL 33344	
2a. Mailing Address	
26	
Suite, Apt. #, etc.	-
27	
City & State	·
28	
Zip	Country
	26 Suite, Apt. #, etc. 27 City & State 28

9. Name and Address of Current Registered Agent

App ied For Not Applicable \$8.75 Additional

[]No

Fee Required

\$5.00 May Be Added to Fees

Yes

DO NOT WRITE IN THIS SPACE

1080 LINTON BLVD DELRAY BEACH FL 33344		82	Street Activess (P.O. Box Number is Not Acceptable)					
		83						
	_	84		FL 85				
11. Pursuant to the provisions of Scittons 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE (NOT : Registered Apen) signature (equired when registation) DATE								
Signature, typed or printed halle on registered agent and due in approache. (NOT I registered agent and due in approache.)								
12.		пЕ			hange	Addition		
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NAME	2.2 N	AME						
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NAME	62N	AME						
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CITY-ST-ZIP	640	TY-S	r- ZIP					
	certify that the information supplied with this filling does not qualify for the exe	moti	on stat	ed in Section 119.07(3)(i). Florida Statutes, I further certify the	at the inf	ormation		

Name

indicated on this annual report or supplied with any already to the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplied ental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or one receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or other attackment with an address, with all other like empowered.

SIGNATURE:

161-276-3989